## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

May 08 1998 8:00am

Secretary of State

# 1801/001 118 1811 8:01 A011 0811 0011 2017 1110 1518 0111 1618 0111 1601

Secretary of State DIVISION OF CORPORATIONS

## P94000039670 (2) DOCUMENT #

A WISE OWL ACCOUNTING & SERVICES, INC.

Principal Place of Business Mailing Address					4 10011301 110 talii 05011 40111 00111 30111 40100 filii 40100 6111 10311 6411 1041			
10161 FLAG PALM BEACH	drive 1 Gardens FL 33410		10161 FLAG DRIVE PALM BEACH GARDENS FL 33410			DO NOT WRITE IN THIS SPACE		
						3, Date Incorporated or Qualified		
<b>6</b> 64-4-15	No. 2 of Dunas and	A. Moiling Asta	Jroop			05/26/1994 4. FEI Number Applied For		
2. Principal Place of Business		·····	2a. Mailing Address			4. FEI Number Applied For 65-0489786 Not Applied For		
Suite, Apt.	#. etc.	Suite, Apt. 1	#. etc.			S8.75 Additional		
22		27				5. Certificate of Status Desired Fee Required		
City & Stat	le	City & State				6. Election Campaign Financing \$5.00 May Be		
23		28			-	Trust Fund Contribution Added to Fees		
Zip	Country	<b>Ζ</b> φ	<u> </u>	ountr	ý	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
24	25 P. Name and Address of Curr	29 Penistered Agent	30	1		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent		
CA CA	ABA, JANICE A	The stock of the state of the s	<del> </del>	81	Name	(A) and and the state of the transfer of t		
1								
1 10161 FLAG DR. PALM BEACH GARDENS FL 33410			Street Ad	dciress (P.O. Box Number is Not Acceptable)				
		•		83				
				84	City	<b>■ 85</b> Zip Code		
					'	FL   ``   `		
11. Pursuant office or agent. La	to the provisions of Sections 607.0 registered agent, or both, in the Sta am familiar with, and accept the obl	iso2 and 607.1508, Floi ate of Florida. Such cha ligations of, Section 60	nda Statutes, the inge was authoriz 7.0505, Florida St	abov ed b atute	e-named c y the corpo s.	corporation submits this statement for the purpose of changing its registere oration's board of directors. I hereby accept the appointment as registered		
SIGNATURE	Signature, typed or printed name of registered a	agent and the if applicable	(NOI's Registe	red Ag	ent signature re	og.nod when reinstating) DATE		
12.		AND DIRECTORS	13	) <u>.</u>		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P		DELETE 1.1	TITLE		Change Addition		
NAME	SABA, AL		1.2	NAME	į			
STREET ADDRESS	10161 FLAG DRIVE				T ADDRESS			
CITY-ST-ZIP	PALM BEACH GARDENS F			CITY-	ST-ZIP	Change Addition		
TITLE	AMENDOLA, LINDA M	(AS)	<b>.</b>	TITLE		Change Addition		
NAME STREET ADDRESS	14132 GREENTREE DRIVE			NAME	T ADDRESS			
CITY-ST-ZIP	WELLINGTON FL				ST-ZIP			
TITLE	1			TITLE		Change Addition		
NAME	SABA, JANICE		3.2	NAME				
STREET ADDRESS	10161 FLAG DRIVE		3.3	STREE	T ADDRESS			
CITY-ST-ZIP	PALM BEACH GARDENS F				ST-ZIP			
TITLE				TITLE		Change Addition		
NAME				NAME				
STREET ADDRESS					T ADDRESS			
CITY-ST-ZIP			:	TITLE	ST-ZIP	Change Addition		
NAME		<u>.</u>		NAME		F-1 A100111		
STREET ADDRESS	!				T ADDRESS			
CITY-ST-ZIP	1			CITY -				
	1	· · · · · · · · · · · · · · · · · · ·	V					
TITLE			DELETE 6.1	TITLE		Change Addition		

6.3 STREET ADDRESS

14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an approximation.